Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL	CONSER	<b>VAT</b>	NOI	DIVISIO	N
<u> </u>			0000		

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 WELL API NO.

5. Indicate Type of Lease

STATE FEE X

P.O. Diawei DD, Autesia, Fine	SIRIE 120 C					
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.					
AND DEPORTS ON WELLS	<i>₹////////////////////////////////////</i>					
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name					
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	/. Lease Name of Our Agreement Frame					
DIFFERENT DECEMBER USE AFFLIOATION OF FINANCE						
(FORM C-101) FOR SUCH PROPOSALS.)	Cossatot F					
1. Type of Well:						
OIL OAS WELL OTHER						
WELL CA	8. Well No.					
2. Name of Operator	5					
John H. Hendrix Corporation	9. Pool name or Wildcat					
3. Address of Operator	n Printer Alexand					
223 W. Wall, Suite 525, Midland, TX 79701 Brunson Drinkard Abo, S						
4 Well Location Wantz Granice Wash						
Unit Letter E: 1980 Feet From The North Line and 66	Feet From The West Line					
Section 23 Township 22S Range 37E	NMPM Lea County					
Section 23 Township 22S Range 37E  10. Elevation (Show whether DF, RKB, RT, GR, etc.)	`					
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>					
Check Appropriate Box to Indicate Nature of Notice, I	Report or Other Data					
	DOEOUTHE DEDORT OF					
NOTICE OF INTENTION TO:	BSEQUENT REPORT OF:					
· · · · · · · · · · · · · · · · · · ·	ALTERNIO CASINO					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING					
FERI OF MITTEEN ACTION AND ADMINISTRATION AND ADMIN	NG OPNS. PLUG AND ABANDONMENT					
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLIN	TO OPNS FLOG AND NOTHING OF INTERFE					
CASING TEST AND C	CEMENT JOB []					

OTHER:

DHC

**PULL OR ALTER CASING** 

OTHER:\_

Well is now DHC as authorized by DHC-899.

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I hereby certify that the information above is true and complete to the best of my knowledges and supplied to the best of my knowledges and the best of my knowledges an	ge and belief.  TITUE Vice-President DATE 9/4/93
TYTE OR PRINT NAME Ronnie H. Westbrook	(915) TELETHONE NO. 684-663
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	SEP 13 1993
ATTROYED BY-	- TITUE

<sup>12.</sup> Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

<sup>8/30/93</sup> POH w/ rods & tbg., and pkr. at 7200'.

<sup>8/31/93</sup> RIH w/ tbg. & rods.

<sup>9/2/93</sup> Tested well.